									Application or Docket Number					
	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 09/9/060 4													
CLAIMS AS FILED - PART I (Column 1) (Column 1)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			7					RA	ſΕ	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			F min	minus 20=		· 0		X\$	9=		OR	X\$18=		
INDEPENDENT CLAIMS			of minus 3 =		' /			X40)=)		OR	X80=	80-	O
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+13	 5=		OR	+270=	20	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOT	AL		OR	TOTAL	7900	00
	CI	LAIMS AS A			(Caluma (I)		SMA		ENTITY	OR	OTHER SMALL			
AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		PREVI		(Column 3) PRESENT EXTRA		RA		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 1	Minus	6	70	= /		Х\$	9=	<u> </u>	OR	X\$18=		
	Independent	· U	Minus	***	Ψ	= /		X40)=	/	OR	X80=	,	
	FIRST PHESE	NTATION OF MI	JETIPLE DEP	ENDEN	I GLAIM		j	+13	5=		OR	+270=		
	1. lastor	· ·					i	T(ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE		
	42/10)	(Column 1)			mn 2)	(Column 3)					- ·			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. //_	Minus	* 0	20	=		X\$:	9=		OR	X\$18=		
	Independent	. 5	Minus	***	4	= /_		X40)=		OR	X80=	Daw	1
	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	T CĽAIM		J	+13	5=		OR	+270=		1
								TC	TAL		OR	TOTAL	100	ł
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT.	FEE			ADDIT. FEE		1
AMENDMENT C		CLAIMS REMAINING AFTER	1	HIGH NUM	IEST IBER OUSLY	PRESENT EXTRA	1	RAT	E	ADDI- TIONAL		RATE	ADDI- TIONAL	
		AMENDMENT		PAID	FOR		$\ \cdot \ $			FEE		ļ	FEE	ł
S	Total	•	Minus	**		=	┨┃	X\$ 9	9=		OR	X\$18=	·	
AM	Independent	NTATION OF M	Minus	ENDEN	T CI 404	<u> -</u>	$\ \ $	X40)=		OR	X80=		
	rinoi PRESE	NIAHON OF M	ochire Der	CHOCK	CLAIM		j	+13	5=		OR	+270=		1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													1	
	The "Highest Num						er fol	and in th	ne ap	propriate bo	x in co	lumn 1.	•	1